

Mental Health Nursing Psychosis Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

- 1. During an admission assessment, which response from the nurse is best when a client says, "I am the second son of God and need to say a prayer"?**
 - A. Encouraging the client to focus on their admission.**
 - B. Waiting until the client finishes the prayer and then completing the assessment.**
 - C. Suggesting a prayer session at a later time.**
 - D. Redirecting the client to discuss their symptoms.**
- 2. Which medication is considered the first-line treatment for attention deficit hyperactivity disorder (ADHD)?**
 - A. Atomoxetine**
 - B. Modafinil**
 - C. Methylphenidate**
 - D. Fluoxetine**
- 3. What is an effective way for a nurse to build a trusting relationship with a client exhibiting paranoid ideation?**
 - A. Maintain distance to respect privacy**
 - B. Encourage social interactions with others**
 - C. Be available on the unit but wait for the client to approach**
 - D. Initiate conversation to assure trust**
- 4. Which extrapyramidal side effect may develop in a client prescribed a typical antipsychotic medication for paranoid schizophrenia?**
 - A. Akathisia**
 - B. Dystonia**
 - C. Tardive dyskinesia**
 - D. Parkinsonism**
- 5. During what time do clients generally hallucinate more vividly?**
 - A. During social interactions**
 - B. After waking up**
 - C. After going to bed**
 - D. During the day**

- 6. When treating a client with schizophrenia, which symptom would most likely be classified as a negative symptom?**
- A. Delusions**
 - B. Affective flattening**
 - C. Hallucinations**
 - D. Thought disorder**
- 7. Which late extrapyramidal side effect should the nurse be aware of when a client is on chlorpromazine?**
- A. Tremors**
 - B. Worm like tongue**
 - C. Bradykinesia**
 - D. Restlessness**
- 8. In terms of long-term management, what is crucial for individuals with schizophrenia?**
- A. Occasional check-ups without consistent treatment.**
 - B. Regular therapy and medication management to prevent relapse.**
 - C. Complete withdrawal from all medications.**
 - D. A focus on only social support systems.**
- 9. In a patient experiencing auditory hallucinations of being poisoned, what paranoid behavior is being exhibited?**
- A. Delusion**
 - B. Catatonia**
 - C. Disorganized thinking**
 - D. Negative symptoms**
- 10. What is a hallmark symptom of schizophrenia?**
- A. Extreme happiness**
 - B. Lack of motivation**
 - C. Delusions and hallucinations**
 - D. Consistent clarity of thought**

Answers

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1. B
2. C
3. C
4. A
5. C
6. B
7. B
8. B
9. A
10. C

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Explanations

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1. During an admission assessment, which response from the nurse is best when a client says, "I am the second son of God and need to say a prayer"?
 - A. Encouraging the client to focus on their admission.
 - B. Waiting until the client finishes the prayer and then completing the assessment.**
 - C. Suggesting a prayer session at a later time.
 - D. Redirecting the client to discuss their symptoms.

The best response in this scenario is for the nurse to wait until the client finishes the prayer and then proceed with the assessment. This approach demonstrates respect for the client's beliefs and needs, acknowledging their spiritual expression without dismissing it as irrelevant or inappropriate. By allowing the client to complete their prayer, the nurse validates their experience and fosters a sense of trust and rapport. This is important in mental health nursing, especially when working with individuals who may be experiencing delusions or heightened spiritual beliefs as part of their psychosis. Once the client feels heard and their immediate need for spiritual expression is addressed, the nurse can then gently guide the conversation back to the assessment, ensuring that the client feels understood and supported. The other responses, while they may seem practical, do not provide the same level of respect for the client's immediate concern. Encouraging the client to focus on the admission may inadvertently invalidate their spiritual need. Suggesting a prayer session at a later time could be perceived as dismissive, especially if the client feels a pressing need to pray. Redirecting the client to discuss their symptoms may also overlook the importance of addressing their current emotional and spiritual state, which can be a critical aspect of their mental health at that moment.

2. Which medication is considered the first-line treatment for attention deficit hyperactivity disorder (ADHD)?
 - A. Atomoxetine
 - B. Modafinil
 - C. Methylphenidate**
 - D. Fluoxetine

Methylphenidate is considered the first-line treatment for attention deficit hyperactivity disorder (ADHD) due to its effectiveness in enhancing attention and reducing impulsivity and hyperactivity in individuals diagnosed with the condition. It acts as a central nervous system stimulant that increases the levels of certain neurotransmitters, particularly dopamine and norepinephrine, in the brain, which are crucial for regulating attention and behavior. Clinical guidelines and numerous studies support the use of methylphenidate as a primary option for managing ADHD symptoms in both children and adults. Its quick onset of action and well-documented efficacy make it a preferred choice among healthcare providers. While atomoxetine is also used to treat ADHD, it is classified as a non-stimulant and is generally considered when patients do not respond well to stimulants or when there are concerns about stimulant use. The other options mentioned, modafinil and fluoxetine, are not standard treatments for ADHD, with modafinil primarily being used to treat narcolepsy and other sleep disorders and fluoxetine being an antidepressant that is not indicated for ADHD. Therefore, methylphenidate stands out as the first-line medication due to its established benefits in effectively managing ADHD symptoms.

3. What is an effective way for a nurse to build a trusting relationship with a client exhibiting paranoid ideation?

- A. Maintain distance to respect privacy**
- B. Encourage social interactions with others**
- C. Be available on the unit but wait for the client to approach**
- D. Initiate conversation to assure trust**

The selected answer emphasizes the importance of availability and the patient's comfort in a therapeutic relationship, particularly for individuals experiencing paranoid ideation. When a client is exhibiting paranoia, they often feel mistrustful and may be hypervigilant about their surroundings and the people in them. By being available on the unit and allowing the client to approach when they feel safe, the nurse respects the client's need for personal space and autonomy. This approach gives the client the power to decide when and how to engage, thereby fostering a sense of control and safety, which is essential in building trust. Maintaining distance may inadvertently communicate disinterest or lack of support, while encouraging social interactions could overwhelm the client or lead to distrust if they feel pressured to engage before they are ready. Initiating conversation without attending to the client's readiness may feel intrusive to them, risking further withdrawal or discomfort. Therefore, being available and waiting for the client to take the lead is a more effective strategy to establish trust.

4. Which extrapyramidal side effect may develop in a client prescribed a typical antipsychotic medication for paranoid schizophrenia?

- A. Akathisia**
- B. Dystonia**
- C. Tardive dyskinesia**
- D. Parkinsonism**

The development of akathisia is significant when considering clients on typical antipsychotic medications for conditions like paranoid schizophrenia. Akathisia is characterized by a feeling of inner restlessness and an uncontrollable need to be in constant motion. This side effect can emerge due to the dopamine antagonistic properties of typical antipsychotics, which disrupt the balance of neurotransmitters in the brain. While akathisia is one possible extrapyramidal side effect, it is important to note that other side effects, such as dystonia, tardive dyskinesia, and parkinsonism, may also occur, especially with long-term use of these medications. Dystonia involves abnormal muscle contractions and postures, parkinsonism presents with symptoms similar to Parkinson's disease (like tremors and rigidity), and tardive dyskinesia is characterized by involuntary movements. Each of these effects arises from the impact of antipsychotic medications on the extrapyramidal system, yet akathisia is particularly notable for its manifestation of restlessness, which distinctly affects a person's behavior and comfort level. Understanding the nuances of these side effects is crucial for nursing practice, as it enables healthcare providers to monitor, identify, and manage complications effectively, ensuring

5. During what time do clients generally hallucinate more vividly?

- A. During social interactions**
- B. After waking up**
- C. After going to bed**
- D. During the day**

Clients experiencing hallucinations often have more vivid episodes after going to bed. This is typically associated with the transition between wakefulness and sleep, a period where the brain is still processing and integrating experiences, but may also become less grounded in reality. During this time, individuals can find their defenses against intrusive thoughts and images weakened, leading to an increase in vivid hallucinations. The phenomenon may be linked to the sleep cycle and the nature of dreaming, where the brain generates complex imagery and scenarios. Therefore, for those with psychosis, this period can lead to intensified sensory experiences that manifest as hallucinations. Understanding this pattern is crucial for mental health professionals in managing treatment and setting expectations for clients.

6. When treating a client with schizophrenia, which symptom would most likely be classified as a negative symptom?

- A. Delusions**
- B. Affective flattening**
- C. Hallucinations**
- D. Thought disorder**

Negative symptoms in schizophrenia refer to a reduction or absence of normal emotional responses or behaviors. Affective flattening specifically describes a diminished emotional expression. This can manifest as a lack of facial expression, reduced eye contact, or a lack of vocal variation. Such symptoms contrast with positive symptoms, which include excessive or distorted thoughts and perceptions, such as delusions or hallucinations. In the context of schizophrenia, while delusions, thought disorder, and hallucinations represent positive symptoms—indicating an excess of experience or behavior— affective flattening demonstrates a deficiency in emotional response. Understanding this distinction clarifies the classification of symptoms in schizophrenia, highlighting how negative symptoms can significantly impact a person's social interactions and ability to engage in daily activities.

7. Which late extrapyramidal side effect should the nurse be aware of when a client is on chlorpromazine?

- A. Tremors
- B. Worm like tongue**
- C. Bradykinesia
- D. Restlessness

The chosen answer refers to tardive dyskinesia, a late extrapyramidal side effect that can occur after prolonged use of antipsychotic medications such as chlorpromazine. Tardive dyskinesia is characterized by repetitive, involuntary movements, which can include a worm-like motion of the tongue. This symptom arises due to long-term dopaminergic antagonism, leading to alterations in the basal ganglia, and is more common with typical antipsychotics like chlorpromazine. Other side effects like tremors, bradykinesia, and restlessness are typically associated with early extrapyramidal symptoms (EPS), which can occur shortly after the initiation of treatment. Tremors or restlessness may manifest during the immediate period of therapy but are not categorized as late effects. Bradykinesia, involving a slowed movement, also falls under the early EPS category. Recognizing tardive dyskinesia and differentiating it from other side effects is crucial for effective management and support for clients on antipsychotic medications.

8. In terms of long-term management, what is crucial for individuals with schizophrenia?

- A. Occasional check-ups without consistent treatment.
- B. Regular therapy and medication management to prevent relapse.**
- C. Complete withdrawal from all medications.
- D. A focus on only social support systems.

Regular therapy and medication management to prevent relapse is crucial for individuals with schizophrenia because these components provide a framework for ongoing care that addresses the chronic nature of the disorder. For many patients with schizophrenia, symptoms may stabilize with treatment, but they remain vulnerable to relapse when treatment is inconsistent or insufficient. Consistent medication helps to stabilize mood and mitigate psychotic symptoms, aiding in the patient's ability to function and engage with the world around them. Therapy further supports this by offering coping strategies, facilitating communication skills, and providing psychoeducation about the disorder, which can empower patients in managing their condition. In contrast, the other options do not offer a sustainable or effective approach for long-term management. Occasional check-ups without consistent treatment do not provide the necessary support to ensure that symptoms remain managed over time. Withdrawal from medications can lead to a resurgence of symptoms and increased risk of relapse. Solely focusing on social support systems, while beneficial, is insufficient without the foundational support of medical and therapeutic interventions that address the biological and psychological components of schizophrenia. These combined approaches constitute a comprehensive care strategy that significantly enhances the quality of life for individuals with this condition.

9. In a patient experiencing auditory hallucinations of being poisoned, what paranoid behavior is being exhibited?

- A. Delusion**
- B. Catatonia**
- C. Disorganized thinking**
- D. Negative symptoms**

The correct answer is delusion, as it relates to a fixed, false belief that is not in line with reality. In this scenario, the patient is experiencing auditory hallucinations specifically involving a belief that they are being poisoned. This indicates a strong conviction that influences their perception of reality and contributes to their paranoia. Delusions are characterized by a firm belief in something that is not substantiated by evidence and persists despite contrary evidence. Auditory hallucinations paired with the specific belief of being poisoned demonstrate a delusional thought process where the individual perceives threats that are not present, thereby reflecting paranoid behavior. Other options, such as catatonia, refer to a state of immobility or unresponsiveness rather than specific thoughts or beliefs. Disorganized thinking involves a lack of ability to organize thoughts, but in this context, the primary issue is the strongly held belief related to the paranoia. Negative symptoms, on the other hand, relate to deficits in normal emotional responses or behaviors, which again do not accurately capture the nature of the patient's experience with auditory hallucinations focused on the idea of poisoning.

10. What is a hallmark symptom of schizophrenia?

- A. Extreme happiness**
- B. Lack of motivation**
- C. Delusions and hallucinations**
- D. Consistent clarity of thought**

A hallmark symptom of schizophrenia includes delusions and hallucinations, which are key features of the disorder. Delusions are false beliefs that are strongly held despite evidence to the contrary, while hallucinations involve experiencing sensations that are not present, such as hearing voices or seeing things that others do not. These symptoms significantly affect an individual's perception of reality and can lead to severe impairment in function and distress. The presence of delusions and hallucinations distinguishes schizophrenia from other mental health conditions, making it essential in the diagnosis and understanding of the disorder. Recognizing these symptoms allows healthcare professionals to implement appropriate treatments and support for affected individuals.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://mentalhealthnursingpsychosis.examzify.com>

We wish you the very best on your exam journey. You've got this!